



EPI-SODE

EPIDEMIOLOGIC SURVEILLANCE OF COMMUNICABLE DISEASE

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In This Issue

- HIPAA and Public Health Reporting: Yes You Can Report!
- Flu News, November 12, 2003
- Tobacco Quit Line Helps Smokers Kick Habit!
- Selected Notifiable Conditions in Clark and Skamania Counties

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1-888-727-6230

HIPAA and Public Health Reporting: Yes You Can Report!

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 has led to the development of new health information privacy standards by the U.S. Department of Health and Human Services (DHHS). The new standards provide protection for the privacy of certain individually identifiable health data, referred to as protected health information (PHI). The HIPAA Privacy Rule 45 CFR §164.512(b) recognizes the legitimate need for public health authorities, that are responsible for protecting the health of the public, to have access to protected health information to carry out their public health functions. The limits on exchange of protected health information generally do not apply to governmental public health agencies. Clark County Health Department is a public health authority as defined by the HIPAA Privacy Rule, 45 C.F.R §164.501.

The HIPAA privacy standards (Privacy Rule) **expressly permit disclosures without individual authorization to public health authorities authorized by law to collect or receive the information for the purposes of preventing or controlling disease, injury, or disability, including but not limited to public health surveillance, investigation, and intervention.** The HIPAA Privacy Rule permits covered entities (health care providers, health plans, and health care clearinghouses) to disclose protected health information without client or patient authorization, to public health authorities. Usually an accounting is required for disclosures made without authorization, including public health purposes.¹ The covered entity does not need a business associate contract, or other agreement with the public health

entity in order to disclose the information. In Washington State, there are several laws and regulations that require disclosure of certain protected health information to public health authorities, and describe the content of notifiable disease reports. Chief among these are WAC 246-101 Notifiable Conditions (as authorized by RCW 43.20.050 Powers and Duties of State Board of Health), RCW 70.28.010 (health care providers required to report tuberculosis cases) and RCW 70.24 (control and treatment of sexually transmitted diseases).

More information about HIPAA is available on the Washington State DOH web site (<http://www.doh.wa.gov/OS/HIPAA/default.htm>) and the Center's for Disease Control and Prevention's (CDC) web site (<http://www.cdc.gov/mmwr/preview/mmwrhtml/su5201a1.htm>).

¹ CDC. HIPAA Privacy Rule and Public Health. MMWR 2003;52(S-1):1-12.

Flu News, November 12, 2003

Influenza activity is picking up. Washington State now has over 12 laboratory confirmed cases of influenza. Of those sub typed, all have been A, H3N2. Cases have come from both eastern and western Washington, although none have been from Clark County. Washington is reporting sporadic influenza activity to the Centers for Disease Control and Prevention. Oregon is reporting one laboratory confirmed case of influenza A, H3N2. It is never too late to receive influenza vaccine. Plenty of vaccine is available this year.

Editor's note: Influenza is not a notifiable condition in Washington State. Surveillance includes reports from sentinel providers, nursing home outbreaks, school absenteeism, and deaths from pneumonia and influenza.

Tobacco Quit Line Helps Smokers Kick Habit! 1-877-270-STOP (7867)*

Tobacco users in Washington who want to quit tobacco have an excellent, research-based tool to help them. The Tobacco Quit Line has received over 30,000 calls since it began in November 2000. Follow-up surveys show callers are very pleased with Quit Line services. Callers to the Quit Line receive free counseling by trained cessation counselors, referrals to cessation programs in their own communities and excellent printed materials tailored to their specific needs. Tobacco users, family members, and healthcare providers can all call the quit line.

There is substantial evidence that brief tobacco dependence treatment is effective. Patients are more likely to quit when counseled by their doctor (Fiore 2000). However, only 50% of patients are asked their tobacco status and less than 5% regularly receive this counseling (CDC 1995).

Free Quit Line promotional materials include business cards, card holders, and posters, call James Lanz (360-397-8416).

*Translation services for non-English speakers are available by request **1-877-270-STOP (7867)**. Spanish speakers can call the Spanish line at 1-877-2NO-FUME. Persons who are deaf or hard of hearing can use a TTY/TDD line by calling 1-877-777-6534.

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SUMMARY OF SELECTED NOTIFIABLE CONDITIONS CLARK AND SKAMANIA COUNTIES, 2003 AND 2002				
CONDITIONS	CLARK COUNTY		SKAMANIA COUNTY	
	Sept. Oct. 2003	Sept. Oct. 2002	Sept. Oct. 2003	Sept. Oct. 2002
Campylobacteriosis	14	14	0	0
<i>Chlamydia trachomatis</i>	170	112	5	0
<i>E. coli</i> O157:H7	7	*	0	0
Giardiasis	8	20	0	0
Gonorrhea	22	21	0	0
<i>Hemophilus influenzae</i>	0	*	0	0
Hepatitis A	*	0	0	0
Hepatitis B, acute	*	*	*	0
Hepatitis B, chronic	13	13	0	0
Hepatitis C (chronic)	52	18	0	*
HIV	*	*	0	0
Latent TB infection +	25	32	0	0
Measles	0	0	0	0
Meningococcal disease	0	*	0	0
Mumps	0	0	0	0
Pertussis	8	*	0	0
Rubella (including congenital)	0	0	0	0
Salmonellosis	*	7	0	0
Shigellosis	*	6	0	0
<i>Streptococcus</i> Group A Invasive	*	0	0	0
Syphilis (primary & secondary)	*	0	0	0
TB active disease	6	*	0	0

*<5 cases

+Patients followed by the health department

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